UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND | |
|--|---|
| 1 Date of Request: 6 20 0 2 Serial/Patent # 10 519911 | |
| 3 Please refund the following fee(s): | 4 PAPER 5 DATE NUMBER FILED 6 AMOUNT |
| / Filing | \$ 100 |
| Amendment | \$ |
| Extension of Time | \$ |
| . Notice of Appeal/Appeal | \$ |
| Petition | \$ |
| Issue | \$ |
| Cert of Correction/Terminal Dis | sc. \$ |
| Maintenance | \$ |
| Assignment | \$ |
| Other | \$ |
| | 7 TOTAL AMOUNT OF REFUND \$ 8 TO BE REFUNDED BY: |
| 10 REASON: | Treasury Check |
| Overpayment | Credit Deposit A/C #: |
| Duplicate Payment | ,50-1/67 |
| No Fee Due (Explanation): | |
| | |
| | |
| | |
| 11 REFUND REQUESTED BY: | |
| TYPED/PRINTED NAME: Darrell Coltman TITLE: Paraless/ SIGNATURE: Name: Darrell Coltman TITLE: Paraless/ PHONE: 703-308-9186x2 | |
| SIGNATURE: Haut (Litter PHONE: 703-308-9186) | |
| office: PCT | |
| THIS SPACE RESERVED FOR FINANCE USE ONLY: | |
| APPROVED: DATE: | |
| | |

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B

PORM PTO 1577 (01/90)